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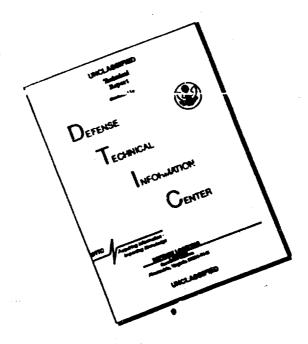
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(Rocoivat minute 0, 1960)

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Presently, the biological test is the only widely approved method of determination of betalinal tering. Nevertheless, this test has a number of eleastwantages, because the correlations of the texth and antit xin are determined indirectly by experiments on animals. The individual sensitivity of animals must always be considered with the conduct and evaluation of experiments on animals; this reflects upon the exactness of the results, particularly when we deal with small deces of texth like 10 to 5 to 1 Dlm. This manifests itself quite clearly in neutralization esperiments with small deces of texth by a specific or nonequesific sorum. Furthermore, neither at all laboratories, nor as all times, are experimental animals available in a weight that is essential to arrangement of a biological test, and this also has a very important effect on practical research. Consequently, we

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were compelled to develop other matrods of detirmination of bounlinal toxin. Thus, we developed: a color reaction for determination of the toxin (G.V.KOLCBOLCTSKII, 1951); the method of determination of phagocytic index (S.M.MINERVIN, S.P.ZHAK and H.I.CHERVYAHOVA, 1450); the ring precipitation reaction (M.YA. MINTOUR and F.A. CHEATKOVA, 1940); the complement fixation reaction (V.F.NIKOLEN-KC and A.A. BURNOS, 1937; A.A. BURNOS and S.A. FRIDLAN, 1937; G"NNISON and SCHOENHOLZ, 1927; STEWART, 1932). A considerable amount of work was devoted to the application of serological reaction in determination of botulinal toxin and this has its reason. The authors were trying to determine the toxin by a direct method with the aid of antibodies. The serological reaction is a more objective method of a quantitative determination of antigens, bocause it offers more exact and constant indigus of the contents of antigens, or antibodies and it differentiates more finely the variations of small doses of toxin. Thus, we paused at the most sensitive serological reaction, - the complement fixation reaction (CFm), in order to determine botulinal toxin.

Inasmuch as the systematic part of the reaction was not fully discussed in the afore-mentioned reports, it is self-evident that a problem emerged to define more accurately the arrangement method or the CFR reaction for a quantitative determination or the torin and to compare its sensitivity with that of the biological test. The authors adopted the universal method of the CFR determination using a 2.5 ml volume. They used as antigon a filtered broth culture of Cl. botulinum in dilution of 1:4 (STEWART), or undiluted in a

volume of 0.1 to 0.4 ml (1.1.5URMOS and 5.0. 1. IDMM). The mathematured used as antigen either the thorapsutie heads on in a columnia of 1:10 and 1:50 (4.4.DULMOS and 5.0.10MMOV,), or a constitution of 1:50 (5UMMISCH and 5Chellmold). The resident (within 1 hour) was carried out to 37°5.

We set the CFR according to the universality adopted method in a volume of 2.5 ml and we used, at the same time, the following components: for antigon - dry botulinal toxin type & of the series No.14 and 18 (obtained from N.F. Guarrall'S Institute of Type and Microbiology); the toxin was diluted with a physiclegical solution and every batch of toxin was titrated on white mice. The toxin of the No.14 series contained in 1 mg 20,000 Dlm., while that of the No.18 series - 10,000 Dlm (T.N.: or MD). We used for antibodies either the usual thorapoutic antibotilinal sorum, obtained from I.I. NECHNILOV'S Scientific Rosearch Institute for Vaccines and Corums, Moscow, or the type-upecific rabbit's serum. We obtained the latter from rabbits immunized with addorbent anatoxin type A. The rabbits' antiserums contained from 32 to 126 BU in 1 ml. We used in reaction a dry complement of the corios No.189 obtained from I.I. MECHNIKOV'S Institute. Conforming with particulars, we carried out the fixation: 1) at 3700 in the course of 1 hour, and 2) at 2°C inthe course of 18 hours. The results were studied in subsequent days after we removed experimental test tubes from thormostatic control and exposed them to been temperature for 2 hours. Then, the tubes were placed in refrigeration for the night. With suppression of homolysis, we took into account the reactions

at +++ and ++++. We obtained negative robults from a preliminary that in CFR using four series of antibotulinal horse series type h in a 1:50 dilution (series No.14 and 18) of the type A temin, of which the active dose comprised 100 Dlm in 1 ml. The research of 212 min and FARKER (1923), PITTMAN and GOODNER (1935), 300DLLR and LOLD. EDI (1936), as well as our research with botulinal anatomin proved that the complement fixation does not occur when antitoxic norse serum is used in reaction. We tested 3 series of rabbits' antisorums ... a dilution of 1:50 in CFR with the same two series (No.14 and 15) of the type A toxin in identical doses. The obtained results were negative. In our work we demonstrated with the aid of the CFR pertinently to determination of antigon activity of botulinal andtoxin that the botulinal antigen-antiserum complex fixes but a small amount of complement, which is not detected with the CPR results in accordance with the universally adopted method. You, it was possible to determine by fixation small amounts of the complement, thus the sensitivity of the CYR has increased with the ise in reaction, c: hemolytic system that contained 0.1% of erythrocytes. First, we retitrated the hemolytic unit to small amounts of the complement. Prior to the arrangement of the basic experiment with the CFR, we determined the hemolytic unit of the complement, the active dose of the toxin and that of the immunic serum. For this reason we carried out the complement titration per se and the complement titration in the presence of ascending dilutions of antigen and serum. We took into account as a complement unit the highest dilution of the complement that afforded a

full hemolysis. The active dose of antigen comprised one half of its quantity with which the hemolytic unit of the complement remained unchanged. In this way we selected the active dose of the serum. One hemolytic unit of the complement comprised 0.1 ml in a 1:30 dilution. The active dose of the toxin comprised 100 Dlm. We used in reaction the doses in the range of 50 to 25 to 10 to 5 and 1 Dlm in a volume of 0.5 ml. The active dose of immune serum comprised 0.5 ml in a 1:100 dilution. We used in the experiment 142 (0.15 ml) and 2 (0.2 ml) hemolytic units of the complement in a 1:30 dilution. As a control measure we used in every experiment double doses of antigen, and serum with 142 and 2 units of the complement. All controls of antigen and serum yielded a full hemolysis in all our experiments.

We submit in Table 1 the results of the experiments involving the set-up of the CPR with two series of toxin. The firstion was accomplished at 2°C temperature within 18 hours. Regative results were obtained from the fixation at 37°C temperature within 1 hour.

It is obvious from Table 1 that, with the aid of the CPR, one can determine quantitatively botulinal toxin type A. In two series of toxins studied by us we determined the toxin in doses of 5 to 10 Dlm. As to the sensitivity, the serological method of determination of botulinal toxin is somewhat inferior to the biological test.

Conclusions

1. The CPR is our sodification can be used for a quantitative

sermination of Botulin forth with the GPR Method

determination of botulinal toxin type A in aqueous medium.

2. With the aid of the CFR, one can accomplish a determination of botulinal toxin type A in doses of 5 to 10 Dlm (MLD).

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Summary (copied)

The present work deals with the use of the complement fixation test in one of its modification for a qualitative (sie!) determination of the A type botulin toxin in an aqueous medium. This reaction permitted to estimate the above toxin in doses of 5 to 10 Dlm. By its accuracy the described procedure is somewhat inferior to the biological test.